## 2016-07-15-0M-00084480

FE6AN026

**FEC** FORM 3X

## REPORT OF RECEIPTS **AND DISBURSEMENTS**For Other Than An Authorized Committee

RECEIVED FEG MAIL CENTER 2016 JUL 15 PM 12: 42

Office Use Only

1.	NAME OF COMMITTEE (in full)		TYPE OR PRINT ▼			ample: If typer the lines.	oing, type	12FE4M5				
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Check if different than previously reported. (ACC)			[# <sub>1</sub> 3,5 <sub>1</sub> 6 <sub>1</sub>   1   1   1									
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2.	FEC ID	ENTIFICATION N	UMBER ▼ CITY					STATE A		ZIP CODE A		
	C 00	9541631			3. IS THIS REPORT		NEW (N) OR		AMENDED (A)			
4.	TYPE OF REPORT (Choose One)		(b) Mo	nthly port	Feb 20 (M2)	į.	May 20 (M5)		Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)	Nov 20 (M11) (Non-Election	
	•	rterly Reports:	Du	e On: man ( - d) ( - d)	Mar 20 (M3)	11 f.14 14-43	Jun 20 (M6)	(14) 333 8 9	Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)	
	1531	April 15 Quarterly Report (0	21)	(1 kj	Apr 20 (M4)		Jul 20 (M7)	<u> </u>	Oct 20 (M10)	<u> </u>	Jan 31 (YE)	
		July 15 Quarterly Report (0	(c)	12-Day PRE-Electio	n (1.15)	Primary (12	2P) :	iyi <b>Ger</b> ∷i	eneral (12G)		Runoff (12R)	
		October 15 Quarterly Report (C		Report for the	he:	Convention	(12C)	Spe	Special (12S)			
	g n H de H de	January 31 Year-End Report (Y		E	lection on	MTM	13	nya ya y L		in the State of	(	
		July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d)	30-Day POST-Elect	T	General (30	0G)	.≘t 'i Run	off (30R)		Special (30S)	
		Termination Report (TER)		Report for the	ilection on		/ D D /	givi vivilizin Garanteen		in the State of		
5. Covering Period 04 01 2016 through 06 30 2016												
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Type or Print Name of Treasurer Jeffrey D. Horn												
$\bigcap_{i\in\mathcal{N}}$												
Signature of Treasurer  Date 07 14 2016												
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.												
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